UNITED STATES DISTRICT COURT SOUTHERN DISTRICT OF NEW YORK

Write the full name of each plaintiff.	- 17 CV 8622 (RJS) (Include case number if one has been assigned)
-against-	AMENDED
City of New York	COMPLAINT
	Do you want a jury trial? ✓ Yes □ No
Write the full name of each defendant. If you need more space, please write "see attached" in the space above and	USDC SDNY
attach an additional sheet of paper with the full list of names. The names listed above must be identical to those contained in Section II.	DOCUMENT ELECTRONICALLY FILED

NOTICE

The public can access electronic court files. For privacy and security reasons, papers filed with the court should therefore not contain: an individual's full social security number or full birth date; the full name of a person known to be a minor; or a complete financial account number. A filing may include only: the last four digits of a social security number; the year of an individual's birth; a minor's initials; and the last four digits of a financial account number. See Federal Rule of Civil Procedure 5.2.

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I. BASIS FOR JURISDICTION

Federal courts are courts of limited jurisdiction (limited power). Generally, only two types of cases can be heard in federal court: cases involving a federal question and cases involving diversity of citizenship of the parties. Under 28 U.S.C. § 1331, a case arising under the United States Constitution or federal laws or treaties is a federal question case. Under 28 U.S.C. § 1332, a case in which a citizen of one State sues a citizen of another State or nation, and the amount in controversy is more than \$75,000, is a diversity case. In a diversity case, no defendant may be a citizen of the same State as any plaintiff.

What is the basis for federal-court jurisdiction in your case?
☐ Diversity of Citizenship
A. If you checked Federal Question
Which of your federal constitutional or federal statutory rights have been violated?
Fulse Arrest, 6th Amedment 14th Amedment
Control of the contro
B. If you checked Diversity of Citizenship
1. Citizenship of the parties
Of what State is each party a citizen?
The plaintiff , , is a citizen of the State of
(Plaintiff's name)
(State in which the person resides and intends to remain.)
or, if not lawfully admitted for permanent residence in the United States, a citizen or subject of the foreign state of
If more than one plaintiff is named in the complaint, attach additional pages providing information for each additional plaintiff.

If the defendant is an individual:		
The defendant, Epicks Rodrigue 2, (Defendant's name)	Carlos Pagan, is a cit	izen of the State of
or, if not lawfully admitted for permanent subject of the foreign state of	residence in the United S	states, a citizen or
If the defendant is a corporation:		
The defendant; Fricks Rodriguez, Co	Mos Pagan, is incorporate	ted under the laws of
the State of New York palice	Department	
and has its principal place of business in the		,
or is incorporated under the laws of (foreig	n state)	
and has its principal place of business in	New York Ci	+/
If more than one defendant is named in the coinformation for each additional defendant.	emplaint, attach additional	pages providing
II. PARTIES		
A. Plaintiff Information		
Provide the following information for each pl pages if needed.	aintiff named in the comp	laint. Attach additional
Dewayne Richardson		
First Name Middle Initial	Last Name	
1470 Amsterdam Ave Ap Street Address	rt#14G	
		10027
Vew York County, City	State	Zip Code
1 (212) 8 62 - 0318 Telephone Number	or and the second of the second	and the second second
Telephone Number	Email Address (if available)	

B. Defendant Information

To the best of your ability, provide addresses where each defendant may be served. If the correct information is not provided, it could delay or prevent service of the complaint on the defendant. Make sure that the defendants listed below are the same as those listed in the caption. Attach additional pages if needed.

Defendant 1:	Ericks Rodrigue				
	First Name	Last Name	Last Name		
	Police Detective Shield# 4675				
	Current Job Title (or ot	her identifying information)			
	Night Watch 3280 Broadway 6Th Floor Current Work Address (or other address where defendant may be served)				
	New York	N.Y.	10027		
	County, City	State	Zip Code		
Defendant 2:	Carlos	Pagan			
	First Name	Last Name			
	Detective				
		Current Job Title (or other identifying information)			
	Current Work Address (Night Watch 3280 Broadway 6th floor Current Work Address (or other address where defendant may be served)			
	New York				
	County, City	State	Zip Code		
Defendant 3:					
	First Name	Last Name			
	Current Job Title (or other identifying information)				
	Current Work Address (or other address where defendant may be served)				
	County, City	ounty, City State Zip Code			

Defendant 4:	First Name	Last Name		
	Current Job Title (or other identifying information)			
	Current Work Address	(or other address where defe	ndant may be served)	
	County, City	State	Zip Code	
III. STATEMI	ENT OF CLAIM			
Place(s) of occu	rrence: my then t	tome residence	en eran	
Date(s) of occur	rence: <u>12/9/16</u> , 1	2/10/16	180	

FACTS:

State here briefly the FACTS that support your case. Describe what happened, how you were harmed, and what each defendant personally did or failed to do that harmed you. Attach additional pages if needed.

on 12/9/16 my Fiance Made A 911 Call, to report she had been Robbed, and Assaulted, on 12/10/16, I was in our room, we shared, when three detectives came in our room, with A key from the front desk detective Ericks, I stop him, and two other officers, at the door which was detetive carlos pagan, I ask them what they where doing intering my room, with A key, they ask me do w live here I said yes me and my Fiance, they ask where your Fiance, I told them in the Hospital, she had A Anxiety Attack, they then told me it would be best to come with them to the fricent, I told them No I'm going to see my Fiance in the hospital. Then went to close the the door, they push there way in handcuff me and search our room with No warrent, locked me up, where I was

detained for 82 day At rikers Islands A.M. K	C.C. Then
detained for 82 day At rikers islands A.M.k. the case was dismissed on 3/1/17, my fiance	nact
away I never had A chance to pay my la	c + vacion
to her	T respe
io per	
INJURIES:	-
If you were injured as a result of these actions, describe your injuries and what medic	al
treatment, if any, you required and received.	
I lost my room all the cloths I had in it	
I lost my room all the cloths I had in it I got into A fight on rikers is land were: Could have been cut, or, Stabed.	I
could have been out or Stabed	
IV. RELIEF	
State briefly what money damages or other relief you want the court to order.	
250.600 punitive \$500,000 monitery	

V. PLAINTIFF'S CERTIFICATION AND WARNINGS

By signing below, I certify to the best of my knowledge, information, and belief that: (1) the complaint is not being presented for an improper purpose (such as to harass, cause unnecessary delay, or needlessly increase the cost of litigation); (2) the claims are supported by existing law or by a nonfrivolous argument to change existing law; (3) the factual contentions have evidentiary support or, if specifically so identified, will likely have evidentiary support after a reasonable opportunity for further investigation or discovery; and (4) the complaint otherwise complies with the requirements of Federal Rule of Civil Procedure 11.

I agree to notify the Clerk's Office in writing of any changes to my mailing address. I understand that my failure to keep a current address on file with the Clerk's Office may result in the dismissal of my case.

Each Plaintiff must sign and date the complaint. Attach additional pages if necessary. If seeking to proceed without prepayment of fees, each plaintiff must also submit an IFP application.

4/19/18		D. Richardson	V
Dated		Plaintiff's Signature	
Dewayne		Richardson	
First Name	Middle Initial	Last Name	
1470 Amsterdam	, Ave Apt 14G		
Street Address			
New York	N, Y,	10	027
County, City	State	Zip	Code
1(212)862-0318			
Telephone Number		Email Address (if availab	le)
I have read the Pro Se (Non	prisoner) Consent to	Receive Documents Ele	ctronically:
□ Yes □ No			
If you do consent to rece	eive documents electror	nically, submit the comple	eted form with your

complaint. If you do not consent, please do not attach the form.

Dewayne Richardson 1470 Amsterdam RuchptAti4G New York N.Y. 10027 New York N.Y. 10007-1312 (No Se NA PUR NOTE TO L MEW YORK NY 100 Second Control of the Control of the